



## UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE  
 United States Patent and Trademark Office  
 Address: COMMISSIONER FOR PATENTS  
 P.O. Box 1450  
 Alexandria, Virginia 22313-1450  
[www.uspto.gov](http://www.uspto.gov)



Bib Data Sheet

CONFIRMATION NO. 6848

|                             |  |              |                        |   |
|-----------------------------|--|--------------|------------------------|---|
| SERIAL NUMBER<br>09/823,300 | FILING OR 371(c)<br>DATE<br>03/29/2001<br>RULE | CLASS<br>345 | GROUP ART UNIT<br>2629 | ATTORNEY<br>DOCKET NO.<br>MULTI-TASK- CELL<br>PHONE |
|-----------------------------|--|--------------|------------------------|---|

**APPLICANTS**

Eric Koenig, Huntington, NY;

Yes *AA***\*\* CONTINUING DATA \*\*\*\*\***

This appln claims benefit of 60/193,040 03/29/2000

**\*\* FOREIGN APPLICATIONS \*\*\*\*\****NO AA***IF REQUIRED, FOREIGN FILING LICENSE GRANTED\*\* SMALL ENTITY \*\***

\*\* 05/17/2001

|  |                        |                        |                            |                                |
|--|------------------------|------------------------|----------------------------|--------------------------------|
| Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no   | STATE OR COUNTRY<br>NY | SHEETS<br>DRAWING<br>5 | TOTAL CLAIMS<br><i>9/9</i> | INDEPENDENT CLAIMS<br><i>4</i> |
| 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after<br>met<br>Verifier and Acknowledged<br><i>James Koenig A.A.</i><br>Examiner's Signature Initials |                        |                        |                            |                                |

**ADDRESS**  
004988

*A.A. A.B.***TITLE**

Multi-task interactive wireless telecommunications device

|                                   |   |   |
|-----------------------------------|---|---|
| <b>FILING FEE RECEIVED</b><br>535 | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |
|-----------------------------------|---|---|